Meagher County Employment Application An Equal Opportunity Employer

The information contained on this form is sought in good faith. It will not be used in any way to discriminate against any applicant for employment in violation of state and federal law.

Important: Please print in ink. You may respond to any of the questions in more detail on a separate sheet of paper if all relevant sections are completed and the same format is followed. On **each** sheet write our name and the job title for which you are applying. You must sign and date in ink each application you submit. **Late, Incomplete, or unsigned applications will not be considered.**

Please read the job vacancy announcement carefully to find: (a) what attachments must be submitted; (b) where to submit your application; (c) the closing date for receipt of applications. An application tailored to the position is to our advantage.

Under state and federal law, qualified applicants with disabilities are entitled to **reasonable accommodations**. Modifications or adjustments may be provided to assist applicants to compete in the recruitment and selection process, to perform the essential duties of the job or to enjoy equal benefits and privileges of employment available to other employees. An applicant must request an accommodation when needed.

Employment Preference: The Veterans' Employment Preference Act and the Persons with Disabilities Employment Preference Act provide preference in public employment for certain military veterans and people with disabilities or their eligible relatives. An applicant claiming employment preference must complete an Employment Preference Form, available through your local Montana Job Service. The applicant must indicate at the bottom of page one of this application form that the necessary documentation is attached.

1.	Name: Last First MI	2. What position are you applying for?						
	Last First MI	(See Job Vacancy Announcement)						
	Social Security #:	Department:						
	Address:	Position Title:						
	Phone #:							
	Home Number	Work Number						
3.	Have you ever been convicted of a felony	? □ Yes □ No						
4. My signature below certifies that all information on this and all attached pages (check are true, correct and complete to the best of my knowledge and contain no willful fals misrepresentations. Falsifications or misrepresentations may disqualify me from confor employment with the County or, if hired, may be grounds for termination at a late Employers may be contacted as references. In the spaces below, I have checked attached.								
	☐ Employment Preference Form/Documentation☐ Other (Specify):	on \square Resume \square Additional Employment Experience						
	Signature:	Date:						

Received	Diploma (or Equiva	alency Certificate:				
College,University, Other Schools & Training Courses Name & Location	Dates Attended		Degree/Certificate Received	Degree/Certificate Date	Major/Minor Field		Credits Earned- Indicate Quarte or Semester Credits
6. List Curre etc.) Licensing Ager Name & Locat	ncy:		icenses, Registrati ppe of License	on, or Certification Endorsement/Rest Applicable	riction If	_	A, engineering,
7. List other	r skills, ed		experience, and a	oilities below. You	•		

8. **Experience:** List your work and/or volunteer experience with emphasis on experience that is relevant to the position for which you are applying. Begin with your present or most recent experience. Include military service that would help you qualify. You may continue this section on a separate sheet of paper if all the same format is followed. Include your name and job title for which you are applying on each sheet.

This information must be completed even if a resume is submitted

Notice to applicants: Information that you provide on this application is subject to verification. Previous employers may be contacted as references. Do you want to be informed before we contact your present employer? \square Yes \square No Name & Complete Address of Employer: Your Job Title: ______ Type of Business: _____ Dates Employed to Phone Number: Immediate Supervisor: ______ Average Hours Per Week: _____ ☐ Full Time ☐ Part Time ☐ Per Diem ☐ Seasonal ☐ Volunteer Describe your duties including your knowledge, skills, abilities required, employees supervised, and your accomplishments: Reason for Leaving:

Experience Continued: Name & Complete Address of Employer: Your Job Title: _____ Type of Business: _____ Dates Employed ______ to _____ Phone Number: _____ Immediate Supervisor: ______ Average Hours Per Week: _____ ☐ Full Time ☐ Part Time ☐ Per Diem ☐ Seasonal ☐ Volunteer Describe your duties including your knowledge, skills, abilities required, employees supervised, and your accomplishments: Reason for Leaving: _____

Experience Continued: Name & Complete Address of Employer: Your Job Title: _____ Type of Business: _____ Dates Employed ______ to _____ Phone Number: _____ Immediate Supervisor: ______ Average Hours Per Week: _____ ☐ Full Time ☐ Part Time ☐ Per Diem ☐ Seasonal ☐ Volunteer Describe your duties including your knowledge, skills, abilities required, employees supervised, and your accomplishments: Reason for Leaving: _____

9.	References: List complete name, address, and phone number of three persons not related to you, whom you have known for at least one year.
	Name:
	Address:
	Phone Number:
	Name:
	Address:
	Phone Number:
	Name:
	Address:
	Phone Number:

READ CAREFULLY

Do Not Write On This Page

Please make sure all required information is included (see job vacancy announcement)

- 1. Did you sign and date application?
- 2. Have you read the job announcement to see where to submit our application and the closing date for submissions?
- 3. Have you checked the appropriate items in Section 4 to indicate what attachments you have included?
- 4. Did you indicate the specific Position Title and Department in Section 2?
- 5. Did you include complete address and phone number for each employer listed in Section 8?
- 6. If you are claiming Veterans Employment preference or Persons with Disabilities Employment Preference, have you completed and attached the Employment Preference Form and Documentation?
- 7. Did you include complete address and phone number for each reference listed in Section 9?